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Office Use Only

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D. BRUCE

DEC 13 2012

EXAMINER

EFFECTIVE DATE Off 13

COVER LETTER

TO: Registration Division of C			
SUBJECT:	Tag T+ Aux Name of Limite	ctions Florida LLC.	
The enclosed Articles	of Organization and fee(s) are so	ubmitted for filing.	
Please return all corres	spondence concerning this matte	er to the following:	
****	Thy	HUYNh. Name of Person	
 		Firm/Company	
27	35 SW 3S	th Place #1804	····
	<u> </u>	Address	
	<u>vainesuille</u>	2 FL 32608. /State and Zip Code UNDA DAMAIL. Com. or future annual report notification)	
	thy chi	bunh Damail.com.	SEC
	E-mail address: (to be used for	or fature annual report notification)	AHE
For further information	n concerning this matter, please	call:	JSS/ Assk
	Hoynh.	at (954) 598-560 7 Area Code & Daytime Telephone Number	Y OF STAT SEE, FLORI
Enclosed is a check	for the following amount:		SA (
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing Certificate of Certified Copy (additional copy)	Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
Tag It Auctions Florida LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	<u> </u>
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Lia	ability Company is:
Principal Office Address: Mailing Address:	
2735 SW 35th Place #1804 2735 SW 38 Crainesville, FL 32608 Gainesville, F	th Place #1804 L32608,
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individuality with an active Florida registration.)	_
The name and the Florida street address of the registered agent are:	75E 75
Thy Huynh Name	FIL DEC 12 CRETAR LAHASS
Florida street address (P.O. Box NOT acceptable)	ED PH 1: 08
Gamesulle FL 32608, City, State, and Zip	100 A
Having been named as registered agent and to accept service of process for the liability company at the place designated in this certificate, I hereby accept the	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FFFECTIVE DATE 01/01/13

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member Managing Member	Thy Huyah 2725 SW 35th Place #1804 Gains ville, FL 32608
(Use attachment if necessary)	•
ARTICLE V: Effective date, if other than the da	ate of filing: 1/1/3
REQUIRED SIGNATURE:	
Signature of a member of	r an authorized-representative of a member.
constitutes an affirmation under the	8(3), Florida Statutes, the execution of this document penalties of perjury that the facts stated herein are true. provided for in s.817.155, F.S.)
Th Typed	y Hoynh or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)